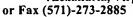
## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address: and/or (b) indicating a separate "FEE ADDRESS" for m

maintenance fee notifications.	ise in Block i, by (a) specify					
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)			"Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
23373 7590 09/27/2006 SUGHRUE MION, PLLC 2100 PENNSYLVANIA AVENUE, N. SUITE 800		Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
WASHINGTON, DC 20037		-			(Depositor's name)	
					(Signature)	
					(Date)	
APPLICATION NO. FILING DATE	FIRST N	IAMED INVENTOR	l	EY DOCKET NO.	CONFIRMATION NO.	
10/762,246 01/23/2004 TITLE OF INVENTION: SYSTEM AND METHOD		iolan Hanina		Q79575	4514	
APPLN. TYPE SMALL ENTITY nonprovisional NO	ISSUE FEE DUE PUBLI	CATION FEE DUE	PREY. PAID ISSUE FEE 1 .	TOTAL FEE(S) DU \$1700	E DATE DUE	
EXAMINER	ART UNIT CLA	SS-SUBCLASS				
РНАМ, НАІ СНІ		347-233000				
<ul> <li>1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>ILI Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>□ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ul>		2. For printing on the patent front page, list  (I) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents: If no name is 3 listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE	(B) RE	ESIDENCE: (CITY	and STATE OR COUNTRY	").	4 4 La 15±64 (	
Orbotech Ltd.		Israel				
Please check the appropriate assignee category or categories (will not be printed on the patent): Let Individual SKorporation or other private group entity Government						
4a. The ollowing fee(s) are submitted:  Y state fee W Publication fee (No small entity discount permitted)  Advance Order - # of Copies		b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is attached for the NUA Fees payment. Please  Charge any payment deficiency and credit overpayment to  PODA 19-4880. A duplicate copy of this form is attached.				
5. Change in Entity Status (from status indicated about a Applicant claims SMALL ENTITY status. S		Applicant is no long	 er claiming SMALL ENTIT	'Y status. See 37 CF	R 1.27(g)(2).	
NOTE: The Issue Fee and Publication Fee (if required interest as shown by the records of the United States	) will not be accepted from a					
Authorized Signature /Kelly G. Hyndman 39,234/			Date Decer	mber 14, 2006	5	
Typed or printed name Kelly G. I			Registration No.	39,234		
This collection of information is required by 37 CFR an application. Confidentiality is governed by 35 U.S submitting the completed application form to the US this form and/or suggestions for reducing this burden Box 1450, Alexandna, Virginia 22313-1450. DO NO Alexandria, Virginia 22313-1450.	.311. The information is requ C. 122 and 37 CFR 1.14. Th PTO. Time will vary dependi should be sent to the Chief I T SEND FEES OR COMPL	uired to obtain or ret is collection is estin ing upon the individ information Officer ETED FORMS TO	lain a benefit by the public wated to take 12 minutes to dual case. Any comments or U.S. Patent and Trademark THIS ADDRESS. SEND T	which is to file (and complete, including to the amount of time coffice, U.S. Depar O: Commissioner f	by the USPTO to process) gathering, preparing, and e you require to complete timent of Commerce, -P.O. or Patents, P.O. Box 1450,	

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